

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>	70		7-25-00
<b>O.I.P.E. CLASSIFIER</b>		21	51,100
<b>FORMALITY REVIEW</b>	JC	135	9-05-00
<b>RESPONSE FORMALITY REVIEW</b>	Zesta	3C 851	03-22-01

**INDEX OF CLAIMS**

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	Original
1	7/30/03
2	7/2/02
3	11/1/01
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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